

Title:	Practitioner Rights				
Department/Line of Business:	Provider Network Operations / All Lines of Business				
Approver(s):	SWHP/ICSW Credentials Committee				
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LINE OF BUSINESS

This document applies to the following line(s) of business:
All Lines of Business

DEFINITIONS

When used in this document with initial capital letter(s), the following word(s)/phrase(s) have the meaning(s) set forth below unless a different meaning is required by context. Additional defined terms may be found in the BSWH P&P Definitions document.

None.

POLICY

Practitioners have the right to review information obtained to evaluate their credentialing application. Practitioner Rights include the following:

- The right to review information obtained from outside sources that are used to evaluate their credentialing application (e.g., state licensing boards and malpractice insurance carriers), with the exception of references, recommendations, or other peer-review protected information.
- The right to be informed of the status of their credentialing/re-credentialing application upon request. This information consists of the status of verification and possible timeframe for submission to the Scott & White Health Plan (SWHP)/Insurance Company of Scott & White ("ICSW") Credentialing Committee.
- The right to correct erroneous information.
 - The Credentialing Coordinator and/or Credentialing Delegate notifies the applicant (via phone, email, or letter) of any information obtained, which is substantially different from that provided by the applicant. Information includes actions on license, malpractice claims history, and board certification decisions.
 - Following notification, the applicant has 15 working days to submit corrections in writing to the Credentialing Coordinator and/or Credentialing Delegate.
 - Credentialing Coordinator and/or Credentialing Delegate documents the receipt of corrected information in the practitioner's credentialing file and the new information is incorporated into the credentialing process.

PROCEDURE

Notification

1. Practitioners are notified of their rights in the attached SWHP/ICSW Guidelines for Selection and Continued Affiliation of Practitioners (SWHP.PNO.011.A1), which are given to the practitioner when they apply to join the SWHP/ICSW network. The Practitioner Rights are also published on the SWHP website (<http://www.swhp.org/>).

2. Application status inquiries are handled by the Credentialing Coordinator and/or Credentialing Delegate. Coordinator or Delegate investigates practitioner status and call, fax, or email (whichever method practitioner prefers) response to practitioner.

Right to Correct Erroneous Information

1. The Credentialing Coordinator and/or Credentialing Delegate notifies the applicant via phone, email, or letter of any information obtained, which is substantially different from that provided by the applicant. Information includes actions on license, malpractice claims history, and board certification decisions.
2. Following notification, the applicant has 15 working days to submit corrections in writing to the Credentialing Coordinator and/or Credentialing Delegate.
3. Credentialing Coordinator and/or Credentialing Delegate documents the receipt of corrected information in the practitioner's credentialing file, and the new information is incorporated into the credentialing process.

ATTACHMENTS

SWHP/ICSW Guidelines for Selection and Continued Affiliation of Practitioners (SWHP.PNO.011.A1)

RELATED DOCUMENTS

None.

REFERENCES

National Committee for Quality Assurance (NCQA): CR 1 Standard
Texas Administrative Code, Title 28 Insurance, Part 1, Chapter 11 Health Maintenance Organization
Texas Insurance Code §843.111

The information contained in this policy is confidential and proprietary and may not be shared without the express permission of the Scott and White Health Plan. Further, the information contained in this document should not be considered standards of professional practice or rules of conduct or for the benefit of any third party. This document is intended to provide guidance and, generally, allows for professional discretion and/or deviation when the individual health care provider or, if applicable, the "Approver" deems appropriate under the circumstances.

Attachment Name:	SWHP/ICSW Guidelines for Selection and Continued Affiliation of Practitioners		
Attachment Number:	SWHP.PNO.011.A1	Last Review/Revision Date:	SWHP.PNO.011.A1

Scott & White Health Plan (SWHP)/Insurance Company of Scott & White (ICSW) Guidelines for Selection and Continued Affiliation of Practitioners

IN DETERMINING WHETHER TO INITIALLY CONTRACT OR CONTINUE AN EXISTING CONTRACT WITH A PARTICULAR PHYSICIAN OR PROVIDER, SWHP/ICSW HAS DEVELOPED A SET OF CRITERIA TO ASSIST IN GUIDING ITS DECISION. SUCH CRITERIA IS FOR GUIDANCE ONLY, AND THE FACT THAT A PARTICULAR PHYSICIAN OR PROVIDER MEETS SOME OF THE CRITERIA MAY NOT NECESSARILY RESULT IN SWHP/ICSW OFFERING TO CONTRACT WITH A PHYSICIAN OR PROVIDER. BELOW ARE SOME OF THE CRITERIA SWHP/ICSW USES TO CONSIDER A PRACTITIONER OR ORGANIZATIONAL PROVIDER FOR AFFILIATION. SWHP/ICSW IS NOT OBLIGATED TO CONTRACT DIRECTLY WITH ANY PHYSICIAN OR PROVIDER. (REFER TO TEXAS INSURANCE CODE §843.111)

Category I. Eligibility for Participation

1. Professional: Credentials in accordance with regulatory requirements and SWHP/ICSW policy and procedure.
 - a. Valid Texas State License.
 - b. Practitioner has hospital privileges at a SWHP/ICSW contracted facility. If the practitioner does not have privileges, a letter is signed that he/she sends SWHP/ICSW members to a contacted facility. If the practitioner is a specialist, except practitioners who normally do not admit (e.g., Ophthalmology, Dermatology, Allergy), a letter of agreement is provided from the physician/group who admits the member to a SWHP/ICSW contracted facility.
 - c. Current ABMS Board certification or being in the active process of seeking Board certification or equivalent by participating in a relevant Board maintenance of competency (MOC) program, in the specialty applying for credentialing. If completed residency prior to 1985, is required to complete 50 American Medical Association Physician Recognition Award® CME credits per year if one is not board certified.
 - In some instances, at the discretion of the SWHP/ICSW Credentials Committee, if a provider is not board certified and no longer eligible, the physician may be allowed to demonstrate competency by other means. At a minimum, the individual shows completion of 50 American Medical Association Physician Recognition Award® credits annually. It is expected that at least 25 is Category 1 and 25 credits (Category 1 or Category 2), which is completed in the physician's medical specialty that they are currently engaged in. Physician submits a statement with their credentialing application indicating that they agree to this requirement.
2. Malpractice limits of at least \$1,000,000/\$3,000,000 or the minimum requirements of the SWHP/ICSW affiliated hospital where privileged. Higher levels of coverage may be required as determined necessary by SWHP/ICSW.

Category II. Quality of Services/Care

1. Facility Management: If a reasonable member complaint is received, an office site visit is conducted to review physical accessibility, physical appearance, adequacy of waiting/examining room space, availability of appointments, and adequacy of treatment record keeping. A score of at least 90% is achieved from the site review.
2. HEDIS/Utilization/Member Complaint Measures: Quality of service and utilization levels is evaluated so that SWHP/ICSW's high standards of quality are being met, and that the level of utilization is appropriate.
3. Quality Reviews: Practitioners/providers cooperate with data collection for quality initiatives.
4. Physicians who do procedures that require consent forms have adopted and implemented the Joint Commission standards for avoiding wrong site/wrong procedure and the "Time Out" policy before procedures are initiated.

Category III. Member Needs in Accordance with Contractual Benefits

Appointment Availability in accordance with SWHP/ICSW Medical Accessibility Standards:

- eye refraction within six (6) weeks, urgent care within 24-48 hours, emergency care same day, primary care within 5 days, preventative care within 6 weeks.
- 1. Geographic location.
- 2. Distance from other practice sites with same type of practitioner or provider.
- 3. Hours of operation, after-hours coverage, and emergency call provisions.
- 4. Areas of SWHP/ICSW membership growth trends.
- 5. Comprehensiveness, nature, and scope of service.
- 6. Unique expertise not found among other practitioners or providers.

Category IV. Personal Attributes

1. Good communication skills and language enhancements.
2. Experience in field of practice, in geographic area, and with SWHP/ICSW.
3. Stability and commitment to professionalism.
4. Professional appearance and attire.
5. Commitment to patient safety protocols and initiatives.

Category V. Organizational Fit

1. Professional reputation.
2. Practice and referral patterns.
3. Commitment to patient care.
4. Cost appropriate for service provided in conjunction with member need.
5. Commitment to community.
6. Efficient, solvent, and properly managed business practice patterns.
7. Demonstrates attitude of cooperation and willingness to work within the SWHP/ICSW.
8. Submits to billing audits.
9. Accurate and appropriate billing practices.

Category VI. Other

Any other factor, which might either enhance or dilute the ability to provide comprehensive, personalized, high quality healthcare in a cost-effective manner, are taken into consideration.

Rights of Applicants to the Scott & White Health Plan/Insurance Company of Scott & White**Right to Inquire About Credentialing Status**

Each applicant to the SWHP/ICSW retains the right to, at any time, inquire about their credentialing status. The practitioner may contact the Provider Relations Department at any time to obtain the current status.

Right to Review

Practitioners have the right to review the information submitted in support of their credentialing applications. However, SWHP/ICSW respects the right of the Peer Review aspects that are integral in the credentialing process. Therefore, practitioners are not be allowed to review references, recommendations, or any other information that is peer review protected. In the event that through the review process, a practitioner discovers an error in the credentialing file, the practitioner does have the right to request a correction of the information in question.

Right to Notification

Practitioners are notified of any information obtained during the credentialing process that varies substantially from the information provided by the practitioner.

Right to Correct Erroneous Information

Practitioners have the right to correct erroneous information. The practitioner is afforded 15 working days to provide corrected information in a written format to the Credentialing Coordinator and/or Credentialing Delegate.

If you have any questions regarding your rights as an applicant to SWHP/ICSW, please do not hesitate to contact the Provider Relations Department at (245) 298-3064 or SWHPPROVIDERRELATIONSDEPARTMENT@sw.org.